

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>D.B.</i>	<i>22282-3-00</i>	
O.I.P.E. CLASSIFIER		<i>59</i>	<i>2/6</i>
FORMALITY REVIEW	<i>AC</i>	<i>71425</i>	<i>3/28/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	7	
2	✓	2	
3	✓	4	
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If more than 150 claims or 10 actions  
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